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FROM: Chad S. Hilyard, Esq.

TELEPHONE: 303-607-3696

DATE: December 7, 2004

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NUMBER OF PAGES (including this page): 6

P&B FILE: 56578-308425

TO: Commissioner for Patents

TELEPHONE:  
FAX: (703) 872-9306

**MESSAGE****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of: Andrew Baird

Examiner: Not Yet Known

Art Unit: Not Yet Known

Confirmation No.: Not Known

Serial No.: 09/934,131

Filed: August 21, 2001

App. Docket No.: 56578-308425

For: SYSTEM AND METHOD FOR PACKAGING DESIGN

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1. TRANSMITTAL FORM;
2. REQUEST TO CORRECT ERRORS IN SMALL ENTITY FEES PAID UNDER 37 C.F.R. § 1.28(c)
3. FEE TRANSMITTAL FOR FY 2005; AND
4. USPTO CREDIT CARD PAYMENT FORM.

*Alicia R. Espinoza*  
Alicia R. Espinoza

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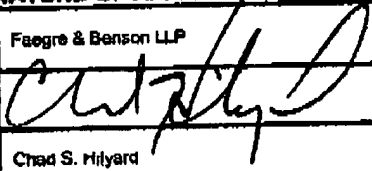
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<b>TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/934,131	<b>RECEIVED</b> <b>DEC 22 2004</b> <b>OFFICE OF PETITIONS</b>
	Filing Date	August 21, 2001	
	First Named Inventor	Andrew Baird	
	Art Unit	Not Yet Known	
	Examiner Name	Not Yet Known	
Total Number of Pages in This Submission	Attorney Docket Number	56578-308425	

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below). Request to Correct Errors in Small Entity Fees Paid Under 37 CFR 1.28 (c) Credit Card Form
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Faegre & Benson LLP		
Signature			
Printed Name	Chad S. Hilyard		
Date	December 7, 2004	Reg. No.	40,647

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			Date
Typed or printed name	Alicia R. Espinoza		December 7, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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**Applicant: Andrew Baird**

**Serial No.: 09/934,131**

**Filed: August 21, 2001**

**For: SYSTEM AND METHOD FOR  
PACKAGING DESIGN**

**Examiner: Not Known**

**Group Art Unit: Not Known**

**Conf. No.: 4916**

**Docket No.: 56578/308425**

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I CERTIFY THAT THIS PAPER IS BEING FACSIMILE TRANSMITTED TO  
THE UNITED STATES PATENT AND TRADEMARK OFFICE VIA  
FACSIMILE NO. (703) 872-9306 ON: 12-7-04

*Alicia R. Espinoza*  
Alicia R. Espinoza

**Request to Correct Errors in Small Entity Fees Paid Under 37 C.F.R. § 1.28(c)**

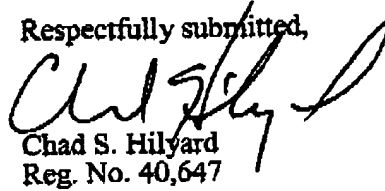
Sir:

During the prosecution of this patent application, the Applicant unintentionally paid small entity fees. Applicant is not entitled to pay small entity fees, and therefore, Applicant is filing this request to correct the fee payment errors. Below is the itemization of the deficiency payments.

Fee Type	Payment Date	Amount Paid	Amount Due	Deficiency Owed
Petition to Revive – unintentional	08/15/04	\$665	\$1370	\$705
Utility Filing Fee	08/21/01	\$355	\$790	\$435
<b>Total Amount Due</b>				<b>\$1140</b>

Applicant respectfully requests the Commissioner to accept this deficiency payment. A credit card payment is attached in the amount of \$1140.

Respectfully submitted,



Chad S. Hilyard  
Reg. No. 40,647

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